2006 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # F98000004312

BLDG FLORIDA APARTMENT CORP.



FILED Mar 20, 2006 08:00 AM **Secretary of State**

Principal Place of Business

52 VANDERBILT AVENUE NEW YORK, NY 10017

Mailing Address

52 VANDERBILT AVENUE NEW YORK, NY 10017



03062006

Na Chg-P

CR2E034 (11/05)

4. FEI Number 13-4016455

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY

DO NOT WOITE

1201 HAYS STREET TALLAHASSEE, FL 32301-2525			IN THIS SPACE		
	ilons of registered agent.	lurpose of changing its registered of	tice or re	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered egent and title in	f epplicable (NOTE: Registered Ager	nt signature	required when reinstating)	DATE
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRECT	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GOLDMAN, LLOYD 52 VANDERBILT AVENUE NEW YORK, NY	·			· · · · · · · · · · · · · · · · · · ·
TITLE NAME STREET ADDRESS GTY-ST-ZIP	V GOLDMAN, KATJA 52 VANDERBILT AVENUE NEW YORK, NY				U00000474612 04/04/06-80031-016 150.00
TITLE NAME STREET ADDRESS GITY-ST-ZIP	S GOLDMAN, DORIAN 52 VANDERBILT AVENUE NEW YORK, NY	·		DO	NOT WRITE
title Name Street address City-St-Zip				IN T	THIS SPACE
TITLE NAME STREET AOURESS CITY-ST-ZIP		-		·	
TITLE NAME	য় এ তেওঁ ভেলভাৰত প্ৰতিয়ত্ত্বলৈ । ১ এ তেওঁ ভেলভাৰত প্ৰতিয়ত্ত্বলৈ । ১ এই জন্ম কৰাৰ লৈ কৰাৰ সমূহ	ong charge of a few and	<u></u>	2 (12 to 12 to 13 to 14 to 15 to	

12. I hardly certify that the information supplied with this filling does not quality for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental typort is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of trusted empoyeded to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with a faddress with all other like empowered.

्राप्त है के दूर करने काल जन्म हर कीए के महत्त्व प्रतान पुर

SIGNATURE:

NAME

STREET ADDRESS CITY-ST-ZIP

LIRE AND PIPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

31612

212-624-4349

Davime Phone &